Labor Organization Officer and Employee Report

U.S. Department of Labor

Employment Standards Administration
Office of Labor-Managemer andards

PPF

This report is mandatory under P.L. 86-257, mended. Fallure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved - OMB No. 1215-0188 Expires 07-31-2004

			. 460	LM 00038,
. Name and address of person filing	2. Name and address of labor organization			
Jay Mazur, President 150 East 69th Street, Apt. 19C New York, NY 10021				
. Position in labor organization	4. Date fiscal year	ended	5. File number (if	assigned)
	12/31/2001		None U-	-1964
inter appropriate data below if, during the past erests (except as specified in the exclusions a	t flacal year, you or yo	ur spouse or minor ch	alld directly or indirectly h	and any of the following in-
Held an interest in, engaged in transactions employer whose employees your organiza	s (including loans) with	n, or derived income of		of monetary value from an
. Name of Employer UNITE	Address of Employer 275 Seventh Avenue, 11th Floor New York, NY 10001			
. Nature of Interest, Transaction or Income				
Member of the Board of Directors B. Held an interest in or derived income or econ from, selling or leasing to, or otherwise dealing seeking to represent, or (2) any part of which or	omic benefit with mone g with the business of a consists of buying from	elary value from a busing employer whose employer whose emplor selling or leasing dire	iness (1) a substantial part	tion represents or is actively
organization or with a trust in which your labor. Name of business	organization is interest	Address of business		
Amalgamated Bank Of New York		Address of Dustriess	15 Union Course	
Amongometed Dank of New 101k	15 Union Square New York, NY 10003			
. Business deals with—		10. If 9B or 9C is che	cked give trust or employer	
☐ A. Labor Organization ☐ B. Trust	☐ C. Employer			
25 Class A/Voting Shares and 25 . 2. Nature of interest held or income received \$267.76	Aremco/Preffered	B Shares valued a	t \$282.00 per share	
. Received from any employer (other than ar	n employer covered und	ker parts A and B above	e) or from any labor relation	s consultant to an employer
any payment of money or other thing of value Name and address of employer	or contributed.	14. Nature of payme	ot and a	
	or consultant	. Nature of payme	2002	0
None		None		SPOLESA SPOLESA MIZEMA
IF MOR	E SPACE IS NEEDED	ATTACH ADDITIONA	L SHEETS	
 Signature and verification—The undersigned the attachments incorporated therein or refer correct and complete. 				
one du manur	at _ New York,	NY		on10/22/03
	City		State	Date
				Form LM-30 (Rev. 1986)